

## MANAGING EMERGENCY ROOM VISITS: AFTER DISCHARGE FROM THE ER CHECKLIST

CHECKLIST

## EMERGENCY ROOM CHECKLIST: AFTER DISCHARGE FROM EMERGENCY ROOM

Clien	t Na	me:
		: Staff to initial each area as completed. Document any comments related to the completion k in the space provided. Forward or file completed Checklist according to agency protocol.
	1.	Discuss any new orders or recommendations with the individual, answer questions at a level appropriate to the individual's comprehension (understanding), and offer support as necessary.
	2.	Ensure timely administration of medications, food, fluids, and hygiene care is provided as necessary and as consistent with emergency room discharge instructions.
	3.	Notify the nurse/supervisor or other personnel per agency policy of the outcome of the emergency room visit.
	4.	Discuss any new orders or recommendations and upcoming appointments/procedures.
	5.	Designated person communicates outcome of the emergency room visit with the support team.
	6.	Support team addresses any issues/barriers regarding implementation of recommendations.
	7.	Designated person takes prescriptions to the pharmacy or deliver per agency policy. Be sure you have a copy of the prescription for the person's medical record.
	8.	Ensure needed medications or supplies are delivered in a timely manner; if not, take action as needed and according to agency policy, including notifying the prescriber/healthcare provider.
	9.	Purchase supplies necessary to implement (apply) treatments/recommendations.
	10.	Transcribe (transfer) any medication orders to the Medication Administration Record per agency policy.
	11.	Ensure medication orders are double checked by another staff person as soon as available.



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12.	Transcribe all orders for monitoring and observation, treatments, and notifications to a treatment sheet so that all staff is aware of the supports that are required for the person's health issue.
13.	Ensure that any orders that are rewritten are double checked by another staff.
14.	Ensure designated person provides staff training as necessary for new treatments and/or medications.
15.	Mark any new appointments or scheduled procedures on the individual's daily calendar.
16.	Ensure a designated agency staff completes necessary revisions to the Risk Plan or develops a new Risk Plan, including plans for following up on the individual's status until problem resolves or stabilizes to guide staff for delivery of care. The individual's support team should be involved in full implementation of any new or revised Risk Plan.
17.	Follow agency policy or physician orders for monitoring if sedated (medication that causes the individual to be sleepy) prior to or during ER visit. At a minimum, this should include ambulating (walking) with assistance and no offer of food or drink by mouth until the individual returns to baseline.
18.	Document events that occurred before, during, and after the emergency room visit, per agency protocol, including any necessary incident reports.
Comments	:

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